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FULWIDER PA' HOWARD HUGH 6060 CENTER DR TENTH FLOOR		CHT, LLF	TEP 0 2 2005	I hereby certify States Postal Se addressed to th transmitted to th	Certificate of Mailing or Tra that this Fee(s) Transmittal is be tryice with sufficient postage for the Mail Stop ISSUE FEE addres to USPTO (703) 746-4000, on the	insmission ing deposited with the United first class mail in an envelope as above, or being facsimile e date indicated below.	
LOS ANGELES, O	CA 90045	No.	PENANCE	John V	. Hanley	(Depositor's name)	
				Ja	U. 12	(Signature)	
				August	30. 2005	(Date)	
APPLICATION NO.	FILING DATE		FIRST NAMED INV	ENTOR	ATTORNEY DOCKET NO	. CONFIRMATION NO.	
10/043,799	01/09/2002		Michael E. Tom	pkins	6/2002 SZIHATES 00000085	062425 10043799	
ΓΙΤLE OF INVENTION: S	PA CONTROL SYSTEM			· 03/0	C:1501	1400.00 OP	
) a	02 F	C:1504	300.00 OP	
				· 03 F	C:8001 9.00 DA		
APPLN. TYPE	SMALL ENTITY	ISSUE FI	EE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1400		\$0	\$1400	09/15/2005	
EXAM	IINER	ART UN	т	CLASS- SUBCLASS	•		
VON BUHF	R, MARIA N	2125		700-278000			
. Change of correspondence	e address or indication of "Fo	ee Address" (37	2. For printing of	on the patent front p	age, list Fulwi	der Patton	
CFR 1.363).	lanca address (ar Chanca of	Camaanandanaa	(1) the names of	of up to 3 registered	d patent attorneys 1 Lee 8	UteCht, LLP	
Address form PTO/SB/12	dence address (or Change of 22) attached.	Correspondence	or agents OR, a	iternatively, `a single firm (havi	ng as a member a 2		
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B. ASSIGNEE NAME AND	RESIDENCE DATA TO B	E PRINTED ON T	HE PATENT (pri	nt or type)		· · ·	
PLEASE NOTE: Unless recordation as set forth in	an assignee is identified be 37 CFR 3.11. Completion	elow, no assignee of this form is NOT	data will appear o a substitute for fi	n the patent. If an ling an assignment.	assignee is identified below, the	document has been filed for	
(A) NAME OF ASSIGN	EE	(В) RESIDENCE: (C	CITY and STATE O	R COUNTRY)		
BXABOA INST	TRUMENTS, INC.	1	382 Bell A	Avenue, Tus	stin, CA 92780		
	assignee category or catego		.		Corporation or other private	group entity Government	
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Issue Fee	mall entity discount permitte			amount of the fee(s			
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Authorized Signature	Jorv. 1.	4/		Date	August 30, 2005		
Typed or printed name	John V. Hanley	, /		Regis	tration No. 38 . 1 71		

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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OPE				Application Number	er	10/043,799		
SEP 0 2 2005	TRA	ANSMITTA	AL	Filing Date		1/9/2002		
2EP 0 % 2003		FORM		First Named Inven	itor	Michael E. Tompkins		
PADEMAR	7			Art Unit		2125		
	(to be used for	all correspondence after	initial filing)	Examiner Name		Maria N. Von Buhr		
(Total Number of	Pages in This Submission	3	Attorney Docket N	umber	BALIN-59231		
			ENCLOSU	JRES (Check all	that apply)			
	Fee Transmittal Form Fee Attached		Drawing(s	s) _J -related Papers		After Allowance Communication to TC Appeal Communication to Board of Appeals and Interferences		
	Amendment	/ Reply	Petition	•		Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)		
	Afte	r Final		o Convert to a al Application		Proprietary Information		
	Affidavits/declaration(s)			Attorney, Revocation of Correspondence Ad	dress	Status Letter		
	Extension of Time Request		Terminal Disclaimer			Other Enclosure(s) (please identify below):		
	Express Aba	ndonment Request	Request for Refund			Postcard; Issue Fee Transmittal		
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		Missing Parts/	CUSTOMER NO. 24201					
		y to Missing Parts under FR 1.52 or 1.53						
ľ		SIGNATUR	E OF APPLICAN	NT, ATTORNEY, O	R AGENT			
	Firm Name	FULWIDER PATTO	ON LEE & UTECHT, LLP					
	Signature	Jnv.						
	Printed name	John V. Hanley	Y					
	Date	8/30/2005			Reg. No.	38,171		
_				TRANSMISSIO				
	I hereby certify that to sufficient postage as date shown below:	his correspondence is bei a first class mail in an enve	ng facsimile transn elope addressed to	nitted to the USPTO o : Commissioner for Pa	r deposited vatents, P.O. I	with the United States Postal Service with Box 1450, Alexandria,VA 22313-1450 on the		
	Signature		<i>(1)</i>					

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8/30/2005

Date

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Effective on 12/08/2004.	Complete if Known				
ees pursuant to the Consolidated Appropriatons Act, 2005 (H.R. 4818).	Application Number	10/043,799			
FEE TRANSMITTAL	Filing Date	1/9/2002			
for FY 2005	First Named Inventor	Michael E. Tompkins			
1	Examiner Name	Maria N. Von Buhr			
Applicant claims small entity status. See 37 CFR 1.27	Art Unit	2125			
TOTAL AMOUNT OF PAYMENT (\$) \$1,700.00	Attorney Docket No.	BALIN-59231			
ETHOD OF PAYMENT (check all that apply)					
Check Credit Card Money Order Nor	e Other (pleas	e identify):			
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fee(s) under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

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	FILING FEES		SEARCH FEES		EXAMINA	ATION FEES	
		Small Entity		Small Entity		Small Entity	
Application Type	Fee (\$)	<u>Fee (\$</u>)	<u>Fee (\$)</u>	<u>Fee (\$)</u>	Fee (\$)	<u>Fee (\$)</u>	Fees Paid(\$)
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	
2 EYCESS CLAIM EEE	·e						O

2. EXCESS CLAIM FEES	3				Small Entity
Fee Description				Fee (\$)	Fee (\$)
Each claim over 20 (include	ding Reissues)			50	25
Each independent claim or	er 3 (including Re	200	100		
Multiple dependent claims				360	180
				Multiple De	endent Claims
Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Fee (\$)	Fee Paid (\$)

- 20 or HP = Х _ \$50.00 = HP = highest number of total claims paid for, if greater than 20. Extra Claims Fee Paid (\$) Indep. Claims Fee (\$)

- 3 or HP = ____ x <u>____\$200.00</u> \$0.00

Charge any additional fee(s) or any underpayment of

HP = highest number of independent claims paid for, if greater than 3.

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3. APPLICATION SIZE FEE

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Total Sheets	Extra Sheets	Number of eac	h additional 50 or fraction thereof		Fee (\$)		Fee Paid (\$)
- 100 =	0 /50	0	(round up to a whole number)	X	\$250.00	=	\$0.00
4. OTHER FEE(S)							Fee Paid (\$)
Non-English specification,	\$130 fee (no small ent	ity discount)					

Other (e.g., late filing surcharge): Issue Fee Transmittal

\$1,700.00

4	SUBMITTED BY							
ſ	Signature	Drv	. /	/	Registration No. (Attorney/Agent)	38,171	Telephone	310-824-5555
1	Name (Print/Type)		$J_{\rm Jo}$	hn V. Ha	nley		Date	8/30/2005

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.